MAR 1 2 2015

City of Milpitas Donation or Fee Waiver/Reduction Request Application Form for Non-Profit Organizations MAR 1.2 2015 ECEIVED

Complete this form and return it to Milpitas City Clerk

| Please provide a copy of the IRS tax-exempt letter with the application. | |
|---|-----------------------------|
| Name of Organization: OUR GADY OF GUADALUPE CLUB ST JOHN THE BAPTICT CHURCH | |
| ST JOHN THE BAPTICE CHURCH s there a Milpitas branch or affiliation? | |
| Mailing Address: 330 Boyn ST | |
| MILP 1745 CAR 95035 | |
| Contact Person: RUBEN ESGUERRA Telephone No. 408 763-60 Email Address: Annyesquerva @ 9AHoo, Com | 09 |
| Email Address: dannyesquerva @ 9AHOO, Com | |
| Vhat is your request? Donation Amount Requested O | R |
| ee Requested to be waived (type and \$ amount) \$ 800,00-MICPING Community CENT | n-Mcc. |
| Event date(s): MAM 9, 2015 - SATURDAY 10AM TO 3PM | |
| What is the purpose of the event? MOTHERS DAY EVENT | |
| | |
| How will the Milpitas community benefit from this event? PROMOTING CULTURAL DIVE | nsize |
| of fift adoloning the first the PUBLIC | |
| Vhat % of the fund raising proceeds will benefit Milpitas community? | ************ |
| | |
| low will the City's contribution (if granted) be recognized in any publicity? AN ACKNOWLER | GING |
| TITLES CONTRIBUTION | |
| Vithin 60 days after completion of the event for which a donation was received or a fee wait eduction was granted by the City of Milpitas, your organization will provide a written report Clerk to include at minimum: number of participants, copies of all publicity of the event, any he community, amount of funds raised and an accounting of how the proceeds of the even | t to the City benefit to |
| lispersed. | |
| Signature of Officer: Russen ESGUEARS - PRESIDENT Print Name & Title: Russen ESGUEARS - PRESIDENT | 15 |
| Print Name & Title: RUBEN ESGUEARA - PRESIDENT | |

Free - Open to the Public!

You are cordially invited to the Second Annual

Pre-Mother's Day Event Dia de Las Madres

May 9, 2015 10:00 am to 3:00 pm Milpitas Community Center 457 E. Calaveras Blvd

Live entertainment; Mariachis, Folklorico dancers, guest singers Hosted by:
Milpitas City Councilwoman
Carmen Montano



Permit Contract

Milpitas Recreation 457 E. Calaveras Blvd. Milpitas, CA 95035 Phone: (408) 586-3210 FAX: (408) 586-3295 Email: --

Ruben Esguerra 330 Boyd St. Milpitas, CA 95035 Email:

Permit #17394, Approved Jan 20, 2015 4:37 PM



Customer Type: Customer Prepared By: Justin Yount

Event

Customer ID: 88394

Work: -- Home: (408) 945-1451

Charges Taxes Discounts Total Charges Deposits Deposit Taxes Total Payments Refunds Balance \$800.00 \$0 \$800.00 \$520.00 \$0 (\$520.00)\$800.00 \$0

RESERVATIONS

Resource Center Motes Event

MCC Auditorium Milpitas Community Center Mother's Day Celebration 457 E Calaveras Blvd Type: Private Rental

Milpitas, Ca 95035 Attend/Qty: 300 (408) 586-3210

Event Duration Ends Begins Date Day

May 9, 2015 at 3:00 PM May 9, 2015 10:00 AM 5 hours Saturday Notes Summary

Total Number of Dates: 1

Total Time: 5 hours

Days Requested

* CHARGES

Event / Unit Fee Units Tax Charge Description Resource

\$160.00 5,00 \$800,00 Hourly Rental Fee-Resident Mother's Day Celebration #17394 MCC Auditorium

DEPOSITS

| Deposit Charge | Event / Resource | Charge | Tax | Amount paid | Refunds | Balance |
|-----------------|---|----------|-----|-------------|---------|---------|
| Application Fee | Mother's Day Celebration #17394 MCC Auditorium | \$20.00 | \$0 | \$20.00 | \$0 | \$0 |
| Rental Deposit | Mother's Day Celebration #17394 MCC Auditorium | \$500.00 | \$0 | \$500.00 | \$0 | \$0 |

Payments and Refunds

| Receipt# | Date | Charge Description | Resource Event | Payment |
|-------------|-------------|--------------------|---|----------|
| 1094701.002 | Feb 6, 2015 | Application Fee | MCC Auditorium Mother's Day Celebration #17394 | \$20.00 |
| 1094701.002 | Feb 6, 2015 | Rental Deposit | MCC Auditorium Mother's Day Celebration #17394 | \$500.00 |

Payment Schedule for Original Balance of \$1,320.00

| Due Date | Amount Due | Amount Paid | Withdrawal Adjustment | 8alance |
|-------------|------------|-------------|-----------------------|----------|
| Apr 9, 2015 | \$1,320.00 | \$520.00 | \$0 | \$800.00 |
| | | | Current Balance | \$800.00 |

T DISCLAIMERS

The BALANCE OF YOUR FEES and a ROOM DIAGRAM must be submitted at least 30 days prior to your rental. Fees may be paid in the form of cash, cashier's check, money order or credit card during our normal business hours. (no personal checks are accepted).

CUSTOM QUESTIONS

| Question | Answer |
|------------------------------|--------|
| Will you be serving alcohol? | No |
| Will you be selling alcohol? | No |

WAIVERS

Rental Waiver

Waiver for: Ruben Esguerra Due Date: May 9, 2015

I, the applicant, have reviewed this permit and agree that the information is accurate and correct.

| Waiver | Signed | by:Ruben | Esguerra | on Jan 20, | 2015 |
|---------|--------|----------|----------|------------|------|
| Signatu | re: | | | | |

Thank you for renting a Milpitas Recreation Services' facility!

This paperwork and the Named Applicant are required for entry into the permitted facility. Entry time is the time listed on the paperwork. If there are facility issues on the day of your event, contact the facility staff on site.

Park Rentals: Please arrive early to make sure the proper signage is placed on the picnic tabletops. If there are park issues on the day of your event, please contact the Milpitas Police Department at 408-586-2400.

Date of This Notice

8924380R

If you Inquire about your account, please refer to this number or attach a

copy of this notice

05-05-81 Employer Identification Number

94-2734503

ROMAN CATHOLIC BISHOP OF THE SAN JOSE A CORPORATION SOLE -7600 Y ST JOSEPH AVE CA 94022

575 8 045555555W 55555555

NOTICE OF NEW EMPLOYER IDENTIFICATION NUMBER ASSIGNED

Thank you for your application for an employer identification number. The number above has been assigned to you. We will use it to identify your business tax returns and any other related documents, even if you have no employees.

Please keep this number in your permanent records. Use the number and your name, exactly as shown above, on all Federal tax forms that require this information, and refer to the number in all tax payments and in tax-related correspondence or documents. You may wish to make a record of the number for reference in case this notice is lost or destroyed.

Note that the assignment of this number does not grant tax-exempt status to nonprofit organizations. For details on how to apply for this exemption, see IRS Publication 557, How to Apply for and Retain Exempt Status for Your Organization, available at any IRS office.

We appreciate your cooperation.

Form 5372 (Rev. 2-80)